

List #:

* Prop ID#:

Prop. Type: **Business For Sale**

* = Required Field

BUSINESS FOR SALE - DATA INPUT

Contract Information

* Listing Date:	* Expiration Date:	* List Price (\$):
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* Type of Listing Service <i>(Select 1)</i> :		
<input type="checkbox"/> Full Service Listing	<input type="checkbox"/> Limited Service Listing	<input type="checkbox"/> MLS Entry Only Listing

* Type of Listing Contract <i>(Select 1)</i> :	
<input type="checkbox"/> Exc. Right to Sell or Lease	<input type="checkbox"/> Exc. Agency to Sell or Lease
<input type="checkbox"/> Exc. Right to Sell with Reserved Prospect	<input type="checkbox"/> Exc. Agency with Reserved Prospect
<input type="checkbox"/> Exc. Right to Sell with Variable Rate Compensation	<input type="checkbox"/> Exc. Agency with Variable Rate Compensation

Items To Be Excluded From Listing:

Commission/Compensation Information

* Buyer's Agent Compensation Type <i>(Select 1)</i> :	
<input type="checkbox"/> Percentage of Sale Price	<input type="checkbox"/> Dollar Amount

* Buyer's Agent Compensation Amount <i>(Enter as either \$ or %)</i> :
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Compensation Notes <i>(Max 3)</i> :	
<input type="checkbox"/> Call Listing Broker For Additional Commission Information	<input type="checkbox"/> Call Listing Broker For Bonus Information
<input type="checkbox"/> Possible Short Sale, Call Listing Broker For More Information	

Listing Agent & Office Information

* List Agent:	Office:
Co-List Agent:	Office:

Listing Address Information

<u>Street #</u>	<u>Pre Dir.</u>	<u>Street Name</u>	<u>Street Type</u>	<u>Post Dir.</u>	<u>Unit #</u>
* State:	* County:		* Town:	* Zip Code: -	
* Neighborhood:			Complex Name:		

Tax Information

Property ID No.:		
PropertyTax (\$):	Assessment (\$):	Mil Rate:
Tax Year:	Last Reassessed:	Phase In <i>(Y/N)</i> :
Tax District (\$):		

Business Information

Business Name:	Business Age <i>(Years):</i>
Current Use:	Number of Employees:
Conforming Use <i>(Select 1):</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Licenses:	Seating Capacity:
Real Estate is for Sale <i>(Y/N):</i>	The Real Estate Included:

Inventory Included in Sale <i>(Y/N):</i>	Inventory Value <i>(\$):</i>
Inventory Valuation Method <i>(Select 1):</i>	
<input type="checkbox"/> Actual <input type="checkbox"/> Estimated	

Equipment Value <i>(\$):</i>
Equipment Valuation Method <i>(Select 1):</i>
<input type="checkbox"/> Actual <input type="checkbox"/> Estimated

Equipment Included <i>(15 Max):</i>			
<input type="checkbox"/> Display Case	<input type="checkbox"/> Display Cooler	<input type="checkbox"/> Display Freezer	<input type="checkbox"/> Draft System
<input type="checkbox"/> Grill	<input type="checkbox"/> Ice Machine	<input type="checkbox"/> Meat Slicer	<input type="checkbox"/> Mix System
<input type="checkbox"/> Music - P/A	<input type="checkbox"/> Satellite Dish	<input type="checkbox"/> Scale	<input type="checkbox"/> Shelving/Counters
<input type="checkbox"/> Television	<input type="checkbox"/> Walk-In Cooler	<input type="checkbox"/> Walk-In Freezer	<input type="checkbox"/> None

Commercial Features <i>(16 Max):</i>			
<input type="checkbox"/> Dock Height Loading	<input type="checkbox"/> Elevator	<input type="checkbox"/> Employee Lounge	<input type="checkbox"/> Fire Sprinkler System
<input type="checkbox"/> Freight Elevator	<input type="checkbox"/> Grade Loading	<input type="checkbox"/> Handicap Design	<input type="checkbox"/> Hoists
<input type="checkbox"/> Intercom	<input type="checkbox"/> Living Space Available	<input type="checkbox"/> Public Restrooms	<input type="checkbox"/> Rail Height Loading
<input type="checkbox"/> Security Alarm	<input type="checkbox"/> Smoke Alarm	<input type="checkbox"/> Waterfront Loading	<input type="checkbox"/> Window Display

Income and Expense

Electric Expense <i>(\$):</i>	Fuel Expense <i>(\$):</i>	Insurance Expense <i>(\$):</i>
Maintenance Exp. <i>(\$):</i>	Management Exp. <i>(\$):</i>	Payroll Expense <i>(\$):</i>
Other Exp. Name:	Other Expense <i>(\$):</i>	Water/Sewer Exp. <i>(\$):</i>
Gross Income <i>(\$):</i>	Other Income <i>(\$):</i>	Total Operating Exp. <i>(\$):</i>
		Net Income <i>(\$):</i>

Lease/Rental Information**Lease Terms** (14 Max):

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> One Year | <input type="checkbox"/> Two Years | <input type="checkbox"/> Three Years | <input type="checkbox"/> Four Years |
| <input type="checkbox"/> Five Years | <input type="checkbox"/> Ten Years | <input type="checkbox"/> Summer Rental | <input type="checkbox"/> Winter Rental |
| <input type="checkbox"/> Month to Month | <input type="checkbox"/> Annual Increase | <input type="checkbox"/> Net/Net/Net | <input type="checkbox"/> Vacate Clause |
| <input type="checkbox"/> First Right of Refusal | <input type="checkbox"/> Lease Purchase Available | | |

Space is Leased (Y/N):**Monthly Lease Expense** (\$):**Years Remaining on Lease:****Tenant Pays For** (13 Max):

- | | | | |
|---|---------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Electric | <input type="checkbox"/> Escalator | <input type="checkbox"/> Expenses Over Base |
| <input type="checkbox"/> Heat | <input type="checkbox"/> Insurance | <input type="checkbox"/> Janitorial | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Sewer | <input type="checkbox"/> Snow Removal | <input type="checkbox"/> Taxes | <input type="checkbox"/> Taxes Over Base |
| <input type="checkbox"/> Trash Service | <input type="checkbox"/> Water | <input type="checkbox"/> None | |

Owner Pays For (10Max):

- | | | | | |
|--|-----------------------------------|---|--|-------------------------------|
| <input type="checkbox"/> All Utilities | <input type="checkbox"/> Electric | <input type="checkbox"/> Fire Insurance | <input type="checkbox"/> Garbage/Trash | <input type="checkbox"/> Gas |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Sewer | <input type="checkbox"/> Taxes | <input type="checkbox"/> Water | <input type="checkbox"/> None |

Structural Information & Exterior Features**Year Built:****Total Square Feet:****Business Sq. Ft.:****Area is Divisible** (Y/N):**Additional Space Available** (Y/N):**Square Foot Source** (Select 1):

- | | | | | |
|------------------------------------|--------------------------------------|-----------------------------------|--------------------------------|---|
| <input type="checkbox"/> Appraiser | <input type="checkbox"/> Approximate | <input type="checkbox"/> Measured | <input type="checkbox"/> Owner | <input type="checkbox"/> Public Records |
|------------------------------------|--------------------------------------|-----------------------------------|--------------------------------|---|

Color:**Construction** (3 Max):

- | | | | | |
|--------------------------------|--------------------------------|-----------------------------------|--------------------------------|------------------------------|
| <input type="checkbox"/> Block | <input type="checkbox"/> Brick | <input type="checkbox"/> Concrete | <input type="checkbox"/> Frame | <input type="checkbox"/> Log |
| <input type="checkbox"/> Metal | <input type="checkbox"/> Stone | <input type="checkbox"/> Other | | |

Foundation (2 Max):

- | | | | | |
|--------------------------------|--------------------------------|-----------------------------------|----------------------------------|---------------------------------|
| <input type="checkbox"/> Block | <input type="checkbox"/> Brick | <input type="checkbox"/> Concrete | <input type="checkbox"/> Masonry | <input type="checkbox"/> Piling |
| <input type="checkbox"/> Slab | <input type="checkbox"/> Stone | <input type="checkbox"/> Wood | <input type="checkbox"/> None | |

Ceiling Height:**Roof** (2 Max):

- | | | | | |
|--|---------------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Asphalt Shingle | <input type="checkbox"/> Built Up | <input type="checkbox"/> Composition | <input type="checkbox"/> Concrete | <input type="checkbox"/> Fiberglass Shngle |
| <input type="checkbox"/> Metal | <input type="checkbox"/> Rubber | <input type="checkbox"/> Shake | <input type="checkbox"/> Slate | <input type="checkbox"/> Tar/Gravel |
| <input type="checkbox"/> Tile | <input type="checkbox"/> Wood Shingle | <input type="checkbox"/> Other | <input type="checkbox"/> Not Applicable | |

Maximum Floor Load:**Flooring** (9 Max):

- Ceramic Tile Concrete Parquet Plywood Slate
 Tile Vinyl Wall to Wall Carpet Wood

Exterior Features (20 Max):

- Door Sign 10' - 15' Doors 16' - 20' Doors 20'+ Doors
 Under 10' Doors Dumpster Fully Fenced Guttering
 Incinerator Lawn Sprinkler Levelers Loading Dock/Grade
 Loading Dock/Well Outside Storage Area Partially Fenced Pole Sign
 Roof Sign Storage Building Storm Cellar Underground Sprinkler

Covered Parking Spaces:**Uncovered Parking Spaces:***** Garages/Parking** (3 Max):

- Attached Carport Detached Driveway Lot
 Off Street Parking Garage Paved Reserved RV/Boat Pad
 Security Street Under Unit Garage Unpaved
 None

Number of Elevators:**Number of Loading Docks:****Number of Overhead Doors:****Number of Restrooms:****Number of Stories:****Number of Tenants:****Number of Units:****Lot and Location Information****Acres:****Lot Square Feet:***** Zoning:****Traffic Count:***** Location** (11 Max):

- Downtown Highway Access Historic Area Industrial Park Office Park
 Park Rural Shopping Mall Strip Mall Suburban
 Urban

Frontage Feet:*** Road Fronts On** (10 Max):

- City Street Cul-De-Sac Interchange Interstate Highway Paved Road
 Private Road State Road U.S. Highway Unimproved Road Unpaved Road

Lot Description (6 Max):

- | | | | | |
|---|---|---|------------------------------------|--|
| <input type="checkbox"/> Additional Land Avail. | <input type="checkbox"/> Corner | <input type="checkbox"/> Cul De Sac | <input type="checkbox"/> Easements | <input type="checkbox"/> Farm |
| <input type="checkbox"/> Flood Zone | <input type="checkbox"/> Golf Course Frontage | <input type="checkbox"/> Horse Property | <input type="checkbox"/> Level | <input type="checkbox"/> Sloping |
| <input type="checkbox"/> Some Wetlands | <input type="checkbox"/> Views | <input type="checkbox"/> Water Frontage | <input type="checkbox"/> Wooded | <input type="checkbox"/> Zero Lot Line |

*** Available Documents** (15 Max):

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Aerial Survey | <input type="checkbox"/> Appraisal | <input type="checkbox"/> Brochure | <input type="checkbox"/> Drawings |
| <input type="checkbox"/> Env. Impact Study | <input type="checkbox"/> Land Survey | <input type="checkbox"/> Lead Disclosure | <input type="checkbox"/> Legal Description |
| <input type="checkbox"/> Percolation Test | <input type="checkbox"/> Plot Plan/Survey | <input type="checkbox"/> Recorded Plat/Plan | <input type="checkbox"/> Soil Survey |
| <input type="checkbox"/> Subdivision Approval | <input type="checkbox"/> Topographical Survey | <input type="checkbox"/> Zoning Waiver | <input type="checkbox"/> None |

Utility Information*** Heating** (4 Max):

- | | | | | |
|------------------------------------|------------------------------------|-----------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Gas | <input type="checkbox"/> Oil | <input type="checkbox"/> Electric | <input type="checkbox"/> Propane | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Wood | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Hot Air | <input type="checkbox"/> Hot Water | <input type="checkbox"/> Steam |
| <input type="checkbox"/> Baseboard | <input type="checkbox"/> Radiant | <input type="checkbox"/> Radiator | <input type="checkbox"/> Wall Unit | <input type="checkbox"/> Space Heater |
| <input type="checkbox"/> Zoned | <input type="checkbox"/> None | | | |

*** Cooling** (4 Max):

- | | | | | |
|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Attic Fan | <input type="checkbox"/> Central Air | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Wall Unit | <input type="checkbox"/> Window Unit |
| <input type="checkbox"/> Zoned | <input type="checkbox"/> None | | | |

*** Available Utilities** (10 Max):

- | | | | | |
|--|--|--|--|---------------------------------------|
| <input type="checkbox"/> Cable | <input type="checkbox"/> Cable Available | <input type="checkbox"/> Electricity | <input type="checkbox"/> Electricity Available | <input type="checkbox"/> Gas |
| <input type="checkbox"/> Gas Available | <input type="checkbox"/> Telephone | <input type="checkbox"/> Phone Available | <input type="checkbox"/> Underground Required | <input type="checkbox"/> None/Unknown |

Electrical Service (10 Max):

- | | | | | |
|--|------------------------------------|-----------------------------------|---|------------------------------------|
| <input type="checkbox"/> 60 Amps or Less | <input type="checkbox"/> 100 Amps | <input type="checkbox"/> 150 Amps | <input type="checkbox"/> 200+ Amps | <input type="checkbox"/> 110 Volts |
| <input type="checkbox"/> 220 Volts | <input type="checkbox"/> 440 Volts | <input type="checkbox"/> 3 Phase | <input type="checkbox"/> Circuit Breakers | <input type="checkbox"/> Fuses |

*** Water** (2 Max):

- | | | | | | |
|-------------------------------------|---|-------------------------------|------------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> City Water | <input type="checkbox"/> Private Water System | <input type="checkbox"/> Well | <input type="checkbox"/> In Street | <input type="checkbox"/> Other | <input type="checkbox"/> None |
|-------------------------------------|---|-------------------------------|------------------------------------|--------------------------------|-------------------------------|

*** Sewer** (3 Max):

- | | | | | | | |
|-----------------------------------|---------------------------------|--------------------------------|-------------------------------------|------------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Cesspool | <input type="checkbox"/> Septic | <input type="checkbox"/> Sewer | <input type="checkbox"/> Sewer Fees | <input type="checkbox"/> In Street | <input type="checkbox"/> Other | <input type="checkbox"/> None |
|-----------------------------------|---------------------------------|--------------------------------|-------------------------------------|------------------------------------|--------------------------------|-------------------------------|

Sewer Fee (\$):

Sewer Assessment:

Association Information

Property Manager:

Manager's Phone:

Manager's Email:

Additional Information

Terms of Sale:

* Showing Instructions:

(ShowingTime Instructions will only appear in ShowingTime and will not appear on any Matrix display)

ShowingTime Instructions:

* Directions:

* Lockbox Description *(Select 1):*

- CMLS Electronic
 Gwch Electronic
 N. C. Electronic
 N. H. Electronic
 Wtbry Electronic
 Combo Box
 Call Listing Office
 None

Lockbox Location:

Occupied By *(Select 1):*

- Owner
 Tenant

* Possession / Occupancy:

* Sign *(Y/N):** Internet Display *(Y/N):** Internet Address Display *(Y/N):*

* Owner's Name:

Owner's Phone:

Tenant's Name:

Tenant's Phone:

Related MLS#:

Remarks

* **Public Remarks** (750 characters max)

Agent Only Remarks (400 characters max)

Addendum Remarks (2400 characters max)

VALID LISTING AGREEMENT STATEMENT

I, the undersigned Broker or Authorized Agent, represent to the Greater Fairfield County Consolidated Multiple Listing Service, Inc., (GFC CMLS) its members and cooperating agents, that I have a valid and legally enforceable: (1.) "Exclusive Right to Sell" listing agreement ____; or (2.) "Exclusive Agency" listing agreement ____; or (3.) "Exclusive Right to Lease" agreement ____, with the owners of the above entitled property. The information contained in the data information sheet is, to the best of my knowledge and belief, true and accurate.

Date: _____

* Listing Broker or Authorized Agent's Signature: _____

ELECTRONIC LOCKBOX AUTHORIZATION

As a service to its members, the GFC CMLS maintains an electronic lockbox system to facilitate controlled and monitored access to the interior of listed properties by Participants of the GFC CMLS. The Undersigned Owner(s) do ____; or do not ____, authorize the Broker to use the GFC CMLS electronic lockbox system in connection with marketing the Property. Owner(s) acknowledge the GFC CMLS electronic lockbox system is NOT A SECURITY SYSTEM and agree that they will indemnify and hold harmless the GFC CMLS from all loss, costs and damages that may be suffered by Owner(s) arising from or related to the use of any lockbox on the property, other than the GFC CMLS electronic lockbox system.

* Seller's Signature: _____ Date: _____

Seller's Signature: _____ Date: _____

AUTHORIZATION TO USE THE MULTIPLE LISTING SERVICE AND DISCLAIMER

The Undersigned Owner(s) authorize and instruct(s) the Broker to submit the information contained herein to the GFC CMLS, Inc. for the purpose of offering the property for sale or lease through its participants during the period specified. This information has been furnished by the Seller and/or other sources and is not guaranteed by the Broker. Owner(s) agree that the information herein is true and correct to his/her/their knowledge. It is understood that there is no contractual relationship between the Owner(s) and the GFC CMLS, Inc. Receipt of a copy of this Property Data Form is acknowledged by Owner(s).

Date: _____

* Listing Broker or Authorized Agent's Signature: _____

* Seller's Signature: _____ Date: _____

Seller's Signature: _____ Date: _____